

Kern County Practitioner Survey of Prenatal Tdap Administration

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California Immunization Coalition Summit

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Background

Cumulative Cases and Rate Infant Pertussis <4 months, 2010-2017		
San Diego	210	290.4
Monterey	28	273.1
Fresno	69	267.9
Kern	46	203.4
Tulare	23	192.6
Riverside	92	191.2
<i>California</i>	<i>1303</i>	<i>160.9</i>
Los Angeles	312	160.0
Orange	96	151.7
San Joaquin	23	145.8
Stanislaus	19	141.5
Santa Clara	51	129.4
San Bernardino	56	112.8
Ventura	17	104.1
Sacramento	27	86.4
San Mateo	11	80.3
Contra Costa	16	79.5
Alameda	21	68.8



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Kern Has First Confirmed Whooping Cough Death in 2016

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FOR IMMEDIATE RELEASE:

May 3, 2016

Bakersfield, CA - Pertussis, better known as whooping cough, has claimed the life of a Kern County infant less than six months of age, the Kern County Department of Public Health announced today. It is the first confirmed death from the disease in Kern County since 2009. "This baby's death is a tragedy for the family and for our community," said Matt Constantine, Director of Kern County Public Health Services Department.

Pertussis is cyclical with peaks in incidence every 3 to 5 years. In 2010, California experienced a pertussis epidemic with more than 9,100 cases, including 376 in Kern County. Another epidemic with more than 11,000 cases in California and 166 cases in Kern County was seen in 2014. Last year, there were 145 cases of pertussis reported in Kern County; 90 percent of those cases were children less than 18 years of age. Of the pediatric cases, 14 percent were in infants who were less than 6 months of age.

"Immunizations are the first line of defense, especially to protect those who are not yet old enough to be vaccinated," said Dr. Claudia Jonah, Public Health Officer for Kern County Public Health Services Department. "We strongly encourage pregnant women to get vaccinated as well as all those who will be in the household of children who are less than twelve months of age. Adults should keep current with their booster shots to reduce the spread of the disease, and all parents should vaccinate their children on time."

The Advisory Committee on Immunization Practices (ACIP) recommends that all pregnant women receive a tetanus, diphtheria, and acellular pertussis (Tdap) vaccine during each pregnancy. While Tdap can be administered at any time during pregnancy, optimal timing is during the third trimester, between 27 and 36 weeks.

Goal

- Assess prenatal Tdap vaccination practices

Questions

- Provider demographics
- General prenatal Tdap recommendation
- Access to Tdap supplies on site
- Tdap referral process
- Timing of Tdap recommendation/administration
- Follow-up of Tdap recommendation/administration
- Patient declinations

Method

- Paper survey
- Hand-delivered by MPH student
- Administered on site or left for provider
- Picked up week later or provider mailed in

*Also provided prenatal Tdap resource toolkit at every visit

Responses

- 45/60 surveys responded (75%)
 - Some providers systematically declined to participate (clinic groups)
- Overall positive responses

Interesting Findings

- Most providers recommending third trimester (27-36)
 - 25 and 26 weeks also selected
 - 12 weeks and postpartum selected by 1 provider each
- 77% of private practitioners did not stock Tdap onsite (100% of clinic groups stocked onsite)
- Most common reason for not stocking: “inadequate reimbursement”
- Half of referring providers did not document referral, 36% did not confirm administration and 27% relied on self-report (no providers reported verifying through fax or CAIR)
- 84% of providers documented when patients refused Tdap, but <50% documented why patients decline

Practitioner Requests

- Educational materials for patients
- Free Tdap vaccinations
- Walk-in clinics for Tdap

Special Thanks

- Lauri McAllister-Vining, MPH
- Participating Providers

Thank you!

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